FINANCIAL DISCLOSURE STATEMENT

(To Be Used By Local Public Officers of Maricopa County)

| | Name: | | | | |
|----------------|--|---------------|--------------------|--|--|
| | Address: | | | | |
| | Office Held: | | | | |
| | Check One: | | | | |
| | I am a local public officer filing this Financial Disclosure Statement covering the months of <u>calendar year 2012</u> . | | | 12 | |
| | I have been appointed to fill a vacancy in a local public office and am filing th Financial Disclosure Statement covering the 12 month period ending with the last furnish prior to the date I took office. | | | | |
| | | VERIFIC | CATION STATE | MENT | |
| correc | • | knowledge, a | nd shows to the ex | s Financial Disclosure Statemen tent of my knowledge the informat | |
| | | | Signature | | |
| State of Count | of | | | | |
| On | thisday of | | | before me personally appears was proved to me on the basis | |
| satisfa | actory evidence to be | the person | _ | abscribed to this document, and v | |
| ackno | wledged that he/she s | igned this do | cument. | | |
| Nota | ry Public | | (Seal) | My Commission Expires | |

SECTION A: PERSONAL DISCLOSURE

| 1. | Your Name | | | | |
|----------------|---|---|--|--|--|
| 2. | Sources of Personal Compensation | | | | |
| paid durin | you more than \$1,000 in salary, wages, | each employer, other than Maricopa County, who commissions, tips or other forms of compensation cribe each employer's business and the services for | | | |
| Also, benef | , . | oyer paid any other person for your direct use or | | | |
| You owne | | eived that was gross income paid to a business you | | | |
| | me and Address of Employer or Other | Description of Employer's Business and Services | | | |
| S | ource of Compensation Over \$1000 | and Services You Provided to the Employer | | | |
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3. Professional, Occupational and Business Licenses

What to disclose: List all such licenses issued to or held by you at any time during the period covered by this Statement.

| Type of License | Name in Which | Jurisdiction(s) of | |
|-----------------|-------------------|--------------------|----------------------|
| or Permit | License is Issued | License | Location of Business |
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4. Personal Creditors

What to disclose: The name and address of each creditor to whom you owed a personal debt over \$1000 during the period covered by this Statement. If the debt was incurred or discharged during this period, list the date and whether it was incurred or discharged.

You need not disclose: Debts resulting from the ordinary conduct of a business (disclose those in Section C). Debts on residences or recreational property, on motor vehicles not used for commercial purposes, on debts secured by cash values on life insurance, or debts you owe to relatives, personal credit card transactions or installment contracts.

| PERSONAL DEBTS OVER \$1,000 | | |
|--|---------------------------------|--|
| Name and Address of Creditor (or Person to Whom Payments Are Made) | Date Incurred and/or Discharged | |
| | | |
| | ☐Incurred ☐Discharged | |
| | | |
| | ☐Incurred ☐Discharged | |
| | | |
| | ☐Incurred ☐Discharged | |
| | | |
| | ☐Incurred ☐Discharged | |

5. Personal Debtors

What to disclose: The name of each debtor who owed you a debt over \$1,000 at any time during the period covered by this Statement, and the approximate value of the debt (See last page for Value Categories). If the debt was incurred or discharged during the period covered by this Statement, report the date and whether the debt was incurred or discharged.

| DEBTS OVER \$1,000 OWED TO YOU PERSONALLY | | | |
|---|--------------------------|------------------------------------|--|
| Name of Debtor | Amount by Value Category | Date Incurred and/or Discharged | |
| | | | |
| | | ☐Incurred ☐Discharged | |
| | | | |
| | | ☐Incurred ☐Discharged | |
| | | | |
| | | ☐Incurred ☐Discharged | |

6. Gifts

What to disclose: The name of the donor who gave you a single gift or an accumulation of gifts with a value over \$500, if that gift does NOT fit into a category below.

You need not disclose: Gifts you received by will, intestate succession, *intervivos* (living) trusts, or testamentary trusts established by a spouse or ancestor, and gifts you received from any relatives to the second degree of consanguinity (parents, grandparents, siblings, children and grandchildren) or political contributions reported on campaign finance reports.

| NAME OF DONOR(S) | | |
|------------------|--|--|
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SECTION B: REPORTABLE INTERESTS

7. Offices or Fiduciary Relationships in Businesses, Non-Profit Organizations or Trusts

What to disclose: The name and address of each business, corporation, partnership, organization, trust or non-profit organization or association in which you held any office OR had a fiduciary relationship during the period covered by this Statement. Describe the office or relationship.

| Name and Address of Organization | Description of Office or Fiduciary Relationship |
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8. Ownership or Financial Interest in Business Entities

What to disclose: The name and address of each business, corporation, partnership, organization, or trust in which you had an ownership or beneficial interest of over \$1,000. This includes joint ventures and sole proprietorships. Describe your interest and categorize the value of the equity. (See last page for value categories.)

| Names and Address of Entity | Description of Interest | Equity by Value Category |
|-----------------------------|-------------------------|--------------------------|
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9. Bonds

What to disclose: Bonds you held anytime during the period covered by this Statement, provided the bonds were issued by the State of Arizona or a political subdivision of the State. If the bonds were either acquired or divested during the period, report the date that occurred.

You need not disclose: Bonds issued by a single entity, when your holding of these bonds does not exceed \$1000 face value.

| | | Value Category | Date Acquired and/or |
|-------------------|----------------|----------------|----------------------|
| Bonds Over \$1000 | Issuing Entity | by Face Value | Divested |
| | | | |
| | | | |
| | | | ☐Acquired ☐Divested |
| | | | |
| | | | |
| | | | ☐Acquired ☐Divested |
| | | | |
| | | | |
| | | | ☐Acquired ☐Divested |

10. Real Property Ownership

What to disclose: Arizona real property and improvements to which you held title during the period covered by this Statement. Describe the property's location and approximate size. Using the Value Categories (see last page) report the value of your equity. If that property was acquired or divested during the period covered by this Statement, list the date and what occurred.

You need not disclose: Your primary residence or property you use for personal recreation.

| Location and Approximate Size of Arizona Realty | Equity by Value Category | Date Acquired and/or Divested |
|---|-----------------------------|----------------------------------|
| | | |
| | | AcquiredDivested |
| | | |
| | | ☐Acquired ☐Divested |
| | | |
| | | ☐Acquired ☐Divested |

SECTION C: BUSINESS INTERESTS

11. Business Names

What to disclose: The name of any business under which you did business during the period covered by this Statement. Include corporations, limited liability companies, joint ventures, sole proprietorships, and partnerships.

| Business Name | Business Address |
|---------------|------------------|
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Value Categories: (from ARS § 38-542(B))

Category 1: \$1,000 to \$25,000

Category 2: More than \$25,000 to \$100,000

Category 3: More than \$100,000